PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.13	Dealest Nearly av (O.		
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 481		-0234P	
		1000	
Application Number 09/316,033-Conf. #007274	riied iv	1ay 21, 1999	
For ELECTRONIC CAMERA			
Art Unit 2615	Examiner	B. C. Genco	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		ropriate fee below).	
Fee  X One month (37 CFR 1.17(a)(1)) \$120	Small Entity Fee \$60	\$ 120.00	
		<u> </u>	
Two months (37 CFR 1.17(a)(2)) \$450	\$225	\$	
Three months (37 CFR 1.17(a)(3)) \$1020	<b>\$</b> 510	\$	
Four months (37 CFR 1.17(a)(4)) \$1590	\$795	\$	
Five months (37 CFR 1.17(a)(5)) \$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27.  X A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director has already been authorized to charge fees in this application to a Deposit Account.  X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet.			
applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  attorney or agent of record. Registration Number			
x attorney or agent under 37 CFR 1.34.		<del></del>	
Registration number if agting under 37 CFR 1	.3440,439		
MM +39.491	July 1	1, 2005	
Signature	D	ate	
- ₽ <sub>i</sub> D. Richard Anderson		205-8000	
Typed or printed name	Telephor	Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  Total of 1 forms are submitted.			

07/12/2005 FFANAEIA 00000057 09316033

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